PTO/SB/01 (09-04)

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Bret Cooper

COMPLETE IF KNOWN

1392/10/19 PCT/US

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Number

DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION

Attorney Docket

First Named Inventor

(37 CFR 1.63)			pplication Number								
Declaration Submitted OR With Initial	X Declarati	***	iling Date								
	Submitte Filing (su	in Cital ge	art Unit								
Filing	(37 CFR required	1.16 (e))) E	Examiner Name								
		·									
i hereby declare that:											
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.											
! believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
CELL PROLIFERATION-RELATED POLYPEPTIDES AND USES THEREFOR											
(Title of the Invention)											
the specification of which											
is attached hereto											
OR											
was filed on (MM/DD/YYYY) 12/23/2003 as United States Application Number or PCT International											
Application Number PCT/US03/41200 and was amended on (MM/DD/YYYY) (if applicable).											
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.											
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for											
continuation-in-part application	is, material info ational filing da	ormation which beca te of the continuatio	ame available betwee n-in-part application.	n the filing date of	of the prior application						
and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent.											
inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign											
application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.											
Prior Foreign Application	ii willen priority	Foreign Filing	Date Prior		ified Copy Attached?						
Number(s)	Country	(MM/DD/YY)	(Y) Not Cla	imed YE	ES NO						
PCT/US03/41200	WIPO	12/23/200)3	╛╏┝	<u> </u>						
60/436,565	US	12/26/200	=	_	닠 닏.						
	· • •	••									
	-	•] _ [
Additional foreign and	olication number	ers are listed on a si	ipplemental priority da	ta sheet PTO/SB	3/02B attached hereto.						

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

correspondence to:	The address associated with Customer Number:	25297				OR		Correspondence address below		
Name			_					, , , , , , , , , , , , , , , , , , , ,		
Address										
City			State				<u> </u>	ZIP		
Olly										
Country	T	Telephone			 	Fax		!		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])					Family Name or Surname					
Bret				Cooper						
Inventor's Signature	<i>~</i>							Date 114 (05		
Residence: City	State	State			Country Citize					
Laurel	<u> </u>		<u>.l</u>		US			US		
Mailing Address 9339 Cre	eekview Drive									
City	State				Zip 20708			Country US		
Laurel		MD	ᅮᆜ		207	00	l			
NAME OF SECOND INVENTOR:				A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])					Family Name or Surname					
Inventor's Signature								Date		
Residence: City	State		Cour	try	-		Citize	enship		
Mailing Address										
City	State			Zip			Coun	trv		
City	State			- 'P				 ,		
Additional inventors or a leg	al representative are beir	ng named on the	_supplem	ental si	heet(s) PTC	/SB/02/	or 02LF	attached hereto.		